

Fill in this information to identify the case:

Debtor Name

Earle Greer

United States Bankruptcy Court for the

Eastern

District of

Pa

Case number:

18-18146

☐ Check if this is an amended filing

Official Form 425C

Monthly Operating Report for Small Business Under Chapter 11

12/17

Month:

June 2019

Date report filed:

9-25-19
MM/DD/YYYY

Line of business:

Real Estate

NAISC code:

In accordance with title 28, section 1746, of the United States Code, I declare under penalty of perjury that I have examined the following small business monthly operating report and the accompanying attachments and, to the best of my knowledge, these documents are true, correct, and complete.

Responsible party:

Earle Greer

Original signature of responsible party

Earle Greer

Printed name of responsible party

Earle Greer

1. Questionnaire

Answer all questions on behalf of the debtor for the period covered by this report, unless otherwise indicated.

If you answer No to any of the questions in lines 1-9, attach an explanation and label it Exhibit A.

- | | Yes | No | N/A |
|--|-------------------------------------|-------------------------------------|-------------------------------------|
| 1. Did the business operate during the entire reporting period? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Do you plan to continue to operate the business next month? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Have you paid all of your bills on time? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Did you pay your employees on time? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 5. Have you deposited all the receipts for your business into debtor in possession (DIP) accounts? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 6. Have you timely filed your tax returns and paid all of your taxes? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Have you timely filed all other required government filings? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Are you current on your quarterly fee payments to the U.S. Trustee or Bankruptcy Administrator? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Have you timely paid all of your insurance premiums? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

If you answer Yes to any of the questions in lines 10-18, attach an explanation and label it Exhibit B.

- | | | | |
|---|--------------------------|-------------------------------------|--------------------------|
| 10. Do you have any bank accounts open other than the DIP accounts? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 11. Have you sold any assets other than inventory? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 12. Have you sold or transferred any assets or provided services to anyone related to the DIP in any way? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 13. Did any insurance company cancel your policy? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 14. Did you have any unusual or significant unanticipated expenses? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 15. Have you borrowed money from anyone or has anyone made any payments on your behalf? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 16. Has anyone made an investment in your business? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

Debtor Name Earle Greer

Case number 18-18146

17. Have you paid any bills you owed before you filed bankruptcy? ☐ ☐ ☐
18. Have you allowed any checks to clear the bank that were issued before you filed bankruptcy? ☐ ☐ ☐

2. Summary of Cash Activity for All Accounts

19. Total opening balance of all accounts

This amount must equal what you reported as the cash on hand at the end of the month in the previous month. If this is your first report, report the total cash on hand as of the date of the filing of this case.

\$ 20.00

20. Total cash receipts

Attach a listing of all cash received for the month and label it *Exhibit C*. Include all cash received even if you have not deposited it at the bank, collections on receivables, credit card deposits, cash received from other parties, or loans, gifts, or payments made by other parties on your behalf. Do not attach bank statements in lieu of *Exhibit C*.

Report the total from *Exhibit C* here.

\$ 20,405

21. Total cash disbursements

Attach a listing of all payments you made in the month and label it *Exhibit D*. List the date paid, payee, purpose, and amount. Include all cash payments, debit card transactions, checks issued even if they have not cleared the bank, outstanding checks issued before the bankruptcy was filed that were allowed to clear this month, and payments made by other parties on your behalf. Do not attach bank statements in lieu of *Exhibit D*.

Report the total from *Exhibit D* here.

- \$ 19,992.41

22. Net cash flow

Subtract line 21 from line 20 and report the result here.

This amount may be different from what you may have calculated as *net profit*.

+ \$ 412.59

23. Cash on hand at the end of the month

Add line 22 + line 19. Report the result here.

Report this figure as the *cash on hand at the beginning of the month* on your next operating report.

This amount may not match your bank account balance because you may have outstanding checks that have not cleared the bank or deposits in transit.

= \$ 432.59

3. Unpaid Bills

Attach a list of all debts (including taxes) which you have incurred since the date you filed bankruptcy but have not paid. Label it *Exhibit E*. Include the date the debt was incurred, who is owed the money, the purpose of the debt, and when the debt is due. Report the total from *Exhibit E* here.

24. Total payables

(*Exhibit E*)

\$ 0.00

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Case number 18-18146

4. Money Owed to You

Attach a list of all amounts owed to you by your customers for work you have done or merchandise you have sold. Include amounts owed to you both before, and after you filed bankruptcy. Label it *Exhibit F*. Identify who owes you money, how much is owed, and when payment is due. Report the total from *Exhibit F* here.

25. Total receivables

\$ 0.00

(Exhibit F)

5. Employees

26. What was the number of employees when the case was filed?

0

27. What is the number of employees as of the date of this monthly report?

0

6. Professional Fees

28. How much have you paid this month in professional fees related to this bankruptcy case?

\$ 0.00

29. How much have you paid in professional fees related to this bankruptcy case since the case was filed?

\$ 0.00

30. How much have you paid this month in other professional fees?

\$ 0.00

31. How much have you paid in total other professional fees since filing the case?

\$ 0.00

7. Projections

Compare your actual cash receipts and disbursements to what you projected in the previous month. Projected figures in the first month should match those provided at the initial debtor interview, if any.

| | Column A Projected | | Column B Actual | | Column C Difference |
|------------------------|--|---|----------------------------------|---|----------------------------------|
| | Copy lines 35-37 from the previous month's report. | | Copy lines 20-22 of this report. | | Subtract Column B from Column A. |
| 32. Cash receipts | \$ <u>21,500</u> | - | \$ <u>20,405</u> | = | \$ <u>1,095.00</u> |
| 33. Cash disbursements | \$ <u>21,000</u> | - | \$ <u>19,992.41</u> | = | \$ <u>1,007.59</u> |
| 34. Net cash flow | \$ <u>-500</u> | + | \$ <u>412.59</u> | = | \$ <u>-87.41</u> |

35. Total projected cash receipts for the next month:

\$ 21,500

36. Total projected cash disbursements for the next month:

- \$ 21,000

37. Total projected net cash flow for the next month:

= \$ 500

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Case number 18-18146

8. Additional Information

If available, check the box to the left and attach copies of the following documents.

- ☒ 38. Bank statements for each open account (redact all but the last 4 digits of account numbers).
- ☐ 39. Bank reconciliation reports for each account.
- ☐ 40. Financial reports such as an income statement (profit & loss) and/or balance sheet.
- ☐ 41. Budget, projection, or forecast reports.
- ☐ 42. Project, job costing, or work-in-progress reports.

Earle Greer
P.O. Box 12548
Philadelphia, Pa 19151
215-868-0481

Exhibit C

Category Summary
Earle Greer [,]
06/01/2019

| Property | Jun | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Total |
|--------------------------------|--------------|--------------|--------------|--------------|----------|----------|----------|----------|----------|----------|----------|----------|--------------|
| 21 N Edgewood St | 705 | 705 | 705 | 705 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 2820 |
| 29 N Ruby St | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 137 N Ruby St | 1260 | 860 | 0 | 1000 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 3120 |
| 149 N Edgewood St | 1200 | 800 | 1250 | 1200 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 4450 |
| 215 Spring Valley Rd | 600 | 0 | 200 | 1600 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 2400 |
| 228 Spring Valley Rd | 800 | 400 | 1100 | 400 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 2700 |
| 266 S Alden St | 660 | 920 | 920 | 720 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 3220 |
| 324 Darby Terr | 0 | 600 | 425 | 380 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1405 |
| 418 S 3rd | 750 | 400 | 800 | 800 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 2750 |
| 512 N Vodges St | 534 | 800 | 800 | 990 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 3124 |
| 735 S Cecil St | 786 | 614 | 700 | 700 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 2800 |
| 1328 Wycombe Ave | 950 | 950 | 950 | 1010 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 3860 |
| 1329 Edgehill Rd | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 1339 Narragansett St | 875 | 875 | 875 | 875 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 3500 |
| 1508 Rainer Rd | 1044 | 894 | 696 | 890 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 3524 |
| 2101 S 68th St | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 2101 S 68th St, 2101 S 68th | 650 | 1300 | 650 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 2600 |
| 2101 S 68th St, 2101 S 68th | 575 | 675 | 450 | 220 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1920 |
| 2403 S Edgewood St | 850 | 850 | 700 | 850 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 3250 |
| 2510 S Bonnaffon St | 660 | 600 | 600 | 700 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 2560 |
| 2536 S Bonnaffon St | 785 | 715 | 750 | 705 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 2955 |
| 2554 S Bonnaffon St | 530 | 260 | 1080 | 490 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 2360 |
| 2620 S 68th St | 0 | 0 | 650 | 250 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 900 |
| 5107 Folsom St | 700 | 700 | 700 | 700 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 2800 |
| 5237 Race St | 825 | 825 | 825 | 825 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 3300 |
| 5461 Cedar Ave | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 5461 Cedar Ave, 5461 Cedar Ave | 725 | 626 | 824 | 725 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 2900 |
| 5461 Cedar Ave, 5461 Cedar Ave | 500 | 500 | 500 | 500 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 2000 |
| 5461 Cedar Ave, 5461 Cedar Ave | 0 | 400 | 400 | 400 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1200 |
| 5711 Reedland St | 750 | 750 | 750 | 850 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 3100 |
| 5715 Reedland St | 707 | 793 | 750 | 750 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 3000 |
| 5721 Haverford Ave | 1250 | 460 | 760 | 1060 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 3530 |
| 6856 Guyer St | 734 | 666 | 700 | 700 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 2800 |
| Totals | 20405 | 18938 | 20510 | 20995 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 80848 |

Categories:
4000 Rental Income

Report Date: 09/24/2019

Exhibit D

6-3 Gas \$30.00

6-5 Home Depot \$600.00 Repairs

6-5 Barco Plumbing Supply \$30.00 Repairs

6-6 Gas \$45.00

6-6 Giant Supermkt \$90.00

6-7 Home Depot \$120.00 Repairs

6-7 Labor \$840.00

6-9 PNC \$777.00 Home Equity Loan

6-9 PNC 41524.12 Home Mortgage Payment

6-9 BB&T \$3350.00 Mortgage Payment

6-10 AT&T \$925.00

6-10 Parking \$10.00

6-12 Basketball \$50.00

6-13 Gas \$45.00

6-13 Home Depot \$185.00

6-13 Credit One Bank \$153.00

6-14 Home Depot \$365.00

6-14 Labor \$1320.00

6-15 Lend Up Credit Card \$100.00

6-15 Gene Appliance \$200.00

6-15 Merrick Bank \$118.00

6-17 Home Depot \$125.00

6-19 Pacifico Ford \$870.00 Car Repairs

6-19 South West Windows \$70.00

6-19 Labor \$200.00 Roof Repair

6-19 Insurance 955.34

6-20 Labor 1860.00

6-23 Dinner \$70.00

6-25 South West Windows \$137.00

6-26 Giant Supermkt \$120.00

6-28 Gas \$45.00

6-28 Son Trip \$150.00

6-28 School Payment \$731.00

6-28 Labor \$110.00

6-28 Harland Checks \$11.95

Total 19,992.41



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STATEMENT OF ACCOUNT

000020313 01 AV 0.380 MTD01040072419378675 0008 03 03



EARLE GREER
PERSONAL BANKRUPTCY
3 CARRIAGE LN
LANSDOWNE PA 19050-2318

Page:

1 of 4

Statement Period:

Jun 24 2019-Jul 23 2019

Cust Ref #:

##

Primary Account #:



TD Simple Checking

EARLE GREER
PERSONAL BANKRUPTCY

Account # 436-6717789

ACCOUNT SUMMARY

| | | | |
|---------------------|----------|--------------------------------|--------|
| Beginning Balance | 20.00 | Average Collected Balance | 597.43 |
| Deposits | 7,720.00 | Interest Earned This Period | 0.00 |
| Other Credits | 1,584.70 | Interest Paid Year-to-Date | 0.00 |
| Checks Paid | 1,584.70 | Annual Percentage Yield Earned | 0.00% |
| Electronic Payments | 3,352.07 | Days in Period | 30 |
| Other Withdrawals | 4,383.00 | | |
| Ending Balance | 4.93 | | |

| | Total for this Period | Total Year-to-Date |
|--------------------------------|-----------------------|--------------------|
| Total Overdraft Fees | \$0.00 | \$0.00 |
| Total Returned Item Fees (NSF) | \$35.00 | \$35.00 |

DAILY ACCOUNT ACTIVITY

Deposits

| POSTING DATE | DESCRIPTION | AMOUNT |
|--------------|-------------|----------|
| 07/08 | DEPOSIT | 7,720.00 |
| | Subtotal: | 7,720.00 |

Other Credits

| POSTING DATE | DESCRIPTION | AMOUNT |
|--------------|---------------|----------|
| 07/17 | RETURNED ITEM | 1,584.70 |
| | Subtotal: | 1,584.70 |

Checks Paid

No. Checks: 1

*Indicates break in serial sequence or check processed electronically and listed under Electronic Payments

| DATE | SERIAL NO. | AMOUNT |
|-------|------------|----------|
| 07/16 | 710 | 1,584.70 |

Subtotal: 1,584.70

Electronic Payments

| POSTING DATE | DESCRIPTION | AMOUNT |
|--------------|--|--------|
| 06/28 | ACH DEBIT, HARLAND CLARKE CHK ORDERS *KH***5303741L7 | 11.95 |
| 07/08 | DEBIT CARD PURCHASE, *****30049662463, AUT 070719 VISA DDA PUR DOX AQUA AMERICA 206 3190097 * WA | 161.13 |
| 07/09 | DEBIT CARD PURCHASE, *****30049662463, AUT 070819 VISA DDA PUR WU SANTANDER CNSMR USA 888 222 4227 * TX | 803.75 |
| 07/09 | DEBIT POS, *****30049662463, AUT 070919 DDA PURCHASE USPS PO 4 658 N 63RD S PHILADELPHIA * PA | 134.00 |

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STATEMENT OF ACCOUNT

EARLE GREER
PERSONAL BANKRUPTCY
 Page: 3 of 4
 Statement Period: Jun 24 2019-Jul 23 2019
 Cust Ref #: [REDACTED]
 Primary Account #: [REDACTED]

DAILY ACCOUNT ACTIVITY

Electronic Payments (continued)

| POSTING DATE | DESCRIPTION | AMOUNT |
|--------------|--|--------|
| 07/10 | DEBIT CARD PURCHASE, *****30049662463, AUT 070919 VISA DDA PUR DELAWARE COUNTY DISTRICT KNOXVILLE * TN | 1.20 |
| 07/10 | DEBIT CARD PURCHASE, *****30049662463, AUT 070919 VISA DDA PUR DELAWARE COUNTY DISTRICT DARBY * PA | 39.98 |
| 07/15 | DEBIT CARD PURCHASE, *****30049662463, AUT 071119 VISA DDA PUR THE HOME DEPOT 4109 PHILADELPHIA * PA | 70.03 |
| 07/15 | DEBIT CARD PURCHASE, *****30049662463, AUT 071119 VISA DDA PUR THE HOME DEPOT 4114 PRIMOS SECANE * PA | 115.63 |
| 07/15 | DEBIT CARD PURCHASE, *****30049662463, AUT 071119 VISA DDA PUR THE HOME DEPOT 4114 PRIMOS SECANE * PA | 535.52 |
| 07/15 | DEBIT CARD PURCHASE, *****30049662463, AUT 071219 VISA DDA PUR PHILADELPHIA CITY OF LIC 800 4874567 * PA | 55.00 |
| 07/15 | DEBIT CARD PURCHASE, *****30049662463, AUT 071219 VISA DDA PUR OPC FEE PHILA L AND I RE 800 4874567 * CA | 1.10 |
| 07/15 | DEBIT CARD PURCHASE, *****30049662463, AUT 071219 VISA DDA PUR PHILADELPHIA CITY OF LIC 800 4874567 * PA | 55.00 |
| 07/15 | DEBIT CARD PURCHASE, *****30049662463, AUT 071219 VISA DDA PUR OPC FEE PHILA L AND I RE 800 4874567 * CA | 1.10 |
| 07/15 | DEBIT CARD PURCHASE, *****30049662463, AUT 071219 VISA DDA PUR PHILADELPHIA CITY OF LIC 800 4874567 * PA | 110.00 |
| 07/15 | DEBIT CARD PURCHASE, *****30049662463, AUT 071219 VISA DDA PUR OPC FEE PHILA L AND I RE 800 4874567 * CA | 2.20 |
| 07/15 | DEBIT CARD PURCHASE, *****30049662463, AUT 071319 VISA DDA PUR PHILADELPHIA CITY OF LIC 800 4874567 * PA | 165.00 |
| 07/15 | DEBIT CARD PURCHASE, *****30049662463, AUT 071319 VISA DDA PUR OPC FEE PHILA L AND I RE 800 4874567 * CA | 3.30 |
| 07/15 | DEBIT CARD PURCHASE, *****30049662463, AUT 071319 VISA DDA PUR PHILADELPHIA CITY OF LIC 800 4874567 * PA | 55.00 |
| 07/15 | DEBIT CARD PURCHASE, *****30049662463, AUT 071319 VISA DDA PUR OPC FEE PHILA L AND I RE 800 4874567 * CA | 1.10 |
| 07/15 | DEBIT CARD PURCHASE, *****30049662463, AUT 071319 VISA DDA PUR PHILADELPHIA CITY OF LIC 800 4874567 * PA | 110.00 |
| 07/15 | DEBIT CARD PURCHASE, *****30049662463, AUT 071319 VISA DDA PUR OPC FEE PHILA L AND I RE 800 4874567 * CA | 2.20 |
| 07/15 | DEBIT CARD PURCHASE, *****30049662463, AUT 071319 VISA DDA PUR PHILADELPHIA CITY OF LIC 800 4874567 * PA | 55.00 |
| 07/15 | DEBIT CARD PURCHASE, *****30049662463, AUT 071319 VISA DDA PUR OPC FEE PHILA L AND I RE 800 4874567 * CA | 1.10 |
| 07/15 | DEBIT CARD PURCHASE, *****30049662463, AUT 071319 VISA DDA PUR PHILADELPHIA CITY OF LIC 800 4874567 * PA | 210.00 |
| 07/15 | DEBIT CARD PURCHASE, *****30049662463, AUT 071319 VISA DDA PUR OPC FEE PHILA L AND I RE 800 4874567 * CA | 4.20 |
| 07/15 | DEBIT CARD PURCHASE, *****30049662463, AUT 071319 VISA DDA PUR PHILADELPHIA CITY OF LIC 800 4874567 * PA | 55.00 |

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